

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

RECEIVED

JOSE ESTRACIA " H-7325	56 SEP 1 5 2016 &
	THOMAS G. BRUTON CLERK, U.S. DISTRICT COURT
(Enter above the full name of the plaintiff or plaintiffs in this action)	
Sheriff Tom DART	Case No: 16 C8471 (To be supplied by the <u>Clerk of this Court</u>) Judge James B. Zagel
(Enter above the full name of ALL defendants in this action. Do not use "et al.")	
CHECK ONE ONLY:	AMENDED COMPLAINT
COMPLAINT UNDER THE U.S. Code (state, county, or	HE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 municipal defendants)
COMPLAINT UNDER TH	HE CONSTITUTION ("BIVENS" ACTION), TITLE ode (federal defendants)
OTHER (cite statute, if known	own)
REFORE FILLING OUT THIS COMPL	AINT PLEASE REFER TO "INSTRUCTIONS FOR

FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

I.	Plaint	riff(s):
	A.	Name: Jose Estrada
	В.	List all aliases: Non?
	C.	Prisoner identification number: # 14-73056
	D.	Place of present confinement: Lincoln C- Center
	E.	Address: PO BOX 549 Lincoln, IC 162156
	numbe	re is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. er, place of confinement, and current address according to the above format on a te sheet of paper.)
II.	(In A position	dant(s): below, place the full name of the first defendant in the first blank, his or her official on in the second blank, and his or her place of employment in the third blank. Space o additional defendants is provided in B and C .)
	A.	Defendant: Sheriff Tom DART
		Title:
		Place of Employment: Cook County Sail
	B.	Defendant:
		Title:
		Place of Employment:
	C.	Defendant:
		Title:
		Place of Employment:
		u have more than three defendants, then all additional defendants must be listed ling to the above format on a separate sheet of paper.)

III.

Name of case and docket number: Second Civil Right Oction 1600841
Approximate date of filing lawsuit:
List all plaintiffs (if you had co-plaintiffs), including any aliases:
List all defendants:
Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county):
Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): Name of judge to whom case was assigned: James B. Zage/
name the county):
Name of judge to whom case was assigned: <u>James B. Zaqel</u>

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. COPLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. **Do not give any legal arguments or cite any cases or statutes.** If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

while Strying in Cook Bunty Unil I toil the officer plant
how Nosty our unit was and that WE Newded Cleaning
Supply to heap our unit Claps there. But doing that time
Supplies Newer cupsof given to ISE. I was took that WE
Wasn't pllowed pay how could they have a penson living
in a place this if he on she isn't given any Clepning
Supply to heap his living AREA Clear. this has to Violated
My 4th gin and 14th moundment, people health is at
Rish living in this place. WE as human being Should be
turphed frin while Storying in Cook Country Soil.
End of cloim.
·

	. ,	
	, i	
	-	
•		

5

Revised 9/2007

		-
T 7	Dal	inf.
V .	Rel	IEI.

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

Di	artiff psk to find in his four for \$500,000 chaptered in the inclinical office Chaptered
Pla	ontiff psk to find in his four for \$500,000
Pla	ontiff Sue Defendant in the inclinical officer Chancity
es.	with pll Respect Durins o Bocky
VI.	The plaintiff demands that the case be tried by a jury. YES NO

CERTIFICATION

By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court.

Signed this 13th day of Sept, 2016
(for the
(Signature of plaintiff or plaintiffs)
V Jose ESTRANA
(Print name)
K73256
(I.D. Number) Box 549
Lingoln IC
62656
(Address)